

COMPENSATORY TIME – EXCESS ACCRUAL AUTHORIZATION REQUEST FORM

Employee Name (please print) _____

Last 4 of Social Security # _____

Division _____

As per Section 1-20-040 B. of the Employee Handbook the above employee is requesting authorization to accrue more than 60 hours (84 for commission fire personnel) of compensatory time.

_____ is authorized to accrue _____ total hours of compensatory time. A maximum of 180 hours can be requested.

Employee

Approved Dept. Head

HR Analyst Training & Compliance

Approved City Manager

A Personnel Action must accompany this request. All hours in excess of 60 (84 for commission fire personnel), must be used prior to June 30th. Any excess compensatory time not used prior to the June 30th date shall not be carried over to subsequent periods. The excess hours will be paid out and the employee will revert back to 60 (84 for commission fire personnel) effective July 1st.

Reason for request: